

AO 440 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Western District of Tennessee

DANIEL LOVELACE and HELEN LOVELACE,
Individually, and as Parents of BRETT LOVELACE,
deceased

Plaintiff(s)

v.

Civil Action No. 13-2289 dkv

PEDIATRIC ANESTHESIOLOGISTS, P.A.;
BABU RAO PAIDIPALLI; and,
MARK P. CLEMONS

Defendant(s)

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* PEDIATRIC ANESTHESIOLOGISTS, P.A.
Registered Agent: Donald E. Bourland
5400 Poplar Ave., Ste. 100
Memphis, TN 38119-3669

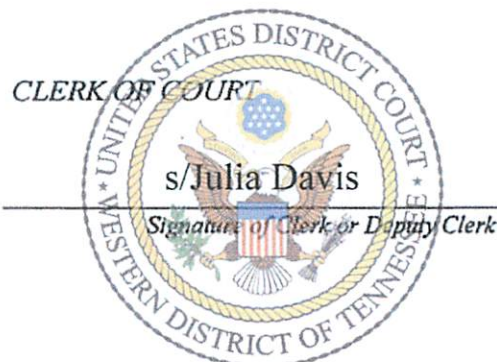
A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Mark Ledbetter
Halliburton & Ledbetter
254 Court Ave., Ste. 305
Memphis, TN 38103
901/523-8153

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 5/8/2013



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Civil Action No. _____

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) _____
was received by me on (date) _____.

☐ I personally served the summons on the individual at (place) _____
_____ on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
_____, a person of suitable age and discretion who resides there,
on (date) _____, and mailed a copy to the individual's last known address; or

☒ I served the summons on (name of individual) DONALD E. BOURLAND, ATTORNEY AT LAW, who is
designated by law to accept service of process on behalf of (name of organization)
PEDIATRIC ANESTHESIOLOGISTS, P.A. on (date) 5-15-2013; or

☐ I returned the summons unexecuted because _____; or

☐ Other (specify): _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 5-15-2013

Don Dunavant, P.P.S.

Server's signature
DON DUNAVANT, PRIVATE PROCESS SERVER

Printed name and title

P.O. Box 80, ELLENDALE, TN. 38029

Server's address

Additional information regarding attempted service, etc:

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4(d))

I am attaching for the court's review the following:

was received by me on (date)

I personally served the summons on the individual at (date)

at (date)

I left the summons at the individual's residence or usual place of abode with (name)

, a person of suitable age and discretion who resides there,

and mailed a copy to the individual's last known address on (date)

I served the summons on (name of individual) (date)

designated by law to accept service of process on behalf of (name of organization)

on (date)

I returned the summons unserved because

My fees are \$ for travel and \$ for services, for a total of \$

I declare under penalty of perjury that this information is true

Server's signature

Printed name and title

Server's address

A physical information regarding completed service etc.

2:05 PM

5-15-2013